

AMENDMENT

STATEMENT OF ECONOMIC INTERESTS

COVER PAGE

A Public Document

Date Received
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COPY

Please type or print in ink

| | | | |
|--|---------|----------|-------------------------------|
| NAME (LAST) | (FIRST) | (MIDDLE) | DAY TIME TELEPHONE NUMBER |
| Tuck | Cynthia | K | [REDACTED] |
| MAILING ADDRESS (May use business address) | STREET | CITY | STATE ZIP CODE |
| [REDACTED] | | | OPTIONAL FAX / E-MAIL ADDRESS |

1. Office, Agency, or Court

Name of Office, Agency, or Court:

California Environmental Protection Agency

Division, Board, District, if applicable:

Your Position:

Undersecretary

➔ If filing for multiple positions, list additional agency(ies)/ position(s): (Attach a separate sheet if necessary.)

Agency: See Amended Attachment

Position:

2. Jurisdiction of Office (Check at least one box)

☒ State

☐ County of _____

☐ City of _____

☐ Multi-County _____

☐ Other _____

3. Type of Statement (Check at least one box)

☐ Assuming Office/Initial

Date: ____/____/____

☒ Annual: The period covered is January 1, 2006, through December 31, 2006.

-or-

☐ The period covered is ____/____/____, through December 31, 2006.

☐ Leaving Office Date Left: ____/____/____ (Check one)

☐ The period covered is January 1, 2006, through the date of leaving office.

-or-

☐ The period covered is ____/____/____, through the date of leaving office.

☐ Candidate

4. Schedule Summary

➔ Total number of pages including this cover page: 4

➔ Check applicable schedules or "No reportable interests."

I have disclosed interests on one or more of the attached schedules:

Schedule A-1 ☐ Yes - schedule attached
Investments (Less than 10% Ownership)

Schedule A-2 ☐ Yes - schedule attached
Investments (10% or greater Ownership)

Schedule B ☐ Yes - schedule attached
Real Property

Schedule C ☐ Yes - schedule attached
Income, Loans, & Business Positions (Income Other than Gifts and Travel Payments)

Schedule D ☒ Yes - schedule attached
Income - Gifts

Schedule E ☒ Yes - schedule attached
Income - Travel Payments

-or-

☐ No reportable interests on any schedule

5. Verification

I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information contained herein and in any attached schedules is true and complete.

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date Signed March 26, 2008
(month, day, year)

Signature

**Attachment to Cynthia Kay Tuck's for 700 for 2007
Specification of Additional Positions**

1. Office, Agency or Court

- A. Agency: California Climate Action Registry Board of Directors
515 South Flower Street, Suite 1640
Los Angeles, CA 90071

Position: Board Member

NOTE: Ms Tuck is filing a **Leaving Office Statement** for this Registry Board position separate from this filing.

- B. Agency: California Bay-Delta Authority
650 Capitol Mall, 5th Floor
Sacramento, CA 95814

Position: Delegate for a Board Member

- C. Agency: California Ocean Protection Council
Coastal Conservancy
1330 Broadway # 1300
Oakland, CA 94612

Position: Voting Alternate for a Council Member

- D. Agency: San Joaquin Valley Partnership
California Business, Transportation, and Housing Agency
980 9th Street, Suite 2450
Sacramento, CA 95814

Position: Voting Alternate for a Board Member

SCHEDULE D Income - Gifts

| |
|--|
| CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION Name Cynthia K. Tuck |
|--|

> NAME OF SOURCE
California Chamber of Commerce

ADDRESS
1215 K Street, Suite 1400, Sacramento, CA

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Business Association

| DATE (mm/dd/yy) | VALUE | DESCRIPTION OF GIFT(S) |
|-----------------|----------|------------------------|
| 9 / 5 / 07 | \$ 53.63 | Food/Beverage * |
| / / | \$ | |
| / / | \$ | |

> NAME OF SOURCE
Silicon Valley Leadership Group

ADDRESS
224 Airport Parkway, Suite 620, San Jose, CA

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Business Association

| DATE (mm/dd/yy) | VALUE | DESCRIPTION OF GIFT(S) |
|-----------------|----------|------------------------|
| 10 / 4 / 07 | \$ 75.00 | Food/Beverage ** |
| / / | \$ | |
| / / | \$ | |

> NAME OF SOURCE

ADDRESS

BUSINESS ACTIVITY, IF ANY, OF SOURCE

| DATE (mm/dd/yy) | VALUE | DESCRIPTION OF GIFT(S) |
|-----------------|-------|------------------------|
| / / | \$ | |
| / / | \$ | |
| / / | \$ | |

> NAME OF SOURCE

ADDRESS

BUSINESS ACTIVITY, IF ANY, OF SOURCE

| DATE (mm/dd/yy) | VALUE | DESCRIPTION OF GIFT(S) |
|-----------------|-------|------------------------|
| / / | \$ | |
| / / | \$ | |
| / / | \$ | |

> NAME OF SOURCE

ADDRESS

BUSINESS ACTIVITY, IF ANY, OF SOURCE

| DATE (mm/dd/yy) | VALUE | DESCRIPTION OF GIFT(S) |
|-----------------|-------|------------------------|
| / / | \$ | |
| / / | \$ | |
| / / | \$ | |

> NAME OF SOURCE

ADDRESS

BUSINESS ACTIVITY, IF ANY, OF SOURCE

| DATE (mm/dd/yy) | VALUE | DESCRIPTION OF GIFT(S) |
|-----------------|-------|------------------------|
| / / | \$ | |
| / / | \$ | |
| / / | \$ | |

Comments: * International Luncheon Forum hosted by the Chamber for India Ambassador, Douglas Hartwick.

** CEO reception

SCHEDULE E
Income – Gifts
Travel Payments, Advances,
and Reimbursements

| |
|--|
| CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION |
| Name Cynthia K. Tuck |

- Reminder – you must mark the gift or income box.
- You are not required to report "income" from government agencies.

| | |
|--|------------------|
| NAME OF SOURCE Environmental Defense | |
| ADDRESS 257 Park Ave., South | |
| CITY AND STATE New York, NY | |
| BUSINESS ACTIVITY, IF ANY, OF SOURCE (NA - 501 (C)(3)) | |
| DATE(S): 4 / 20 / 07 - 5 / 01 / 07 | AMT: \$ 1,282.11 |
| (If applicable) | |
| TYPE OF PAYMENT: (must check one) <input checked="" type="checkbox"/> Gift <input type="checkbox"/> Income | |
| DESCRIPTION: Airfare to Meeting. | |

| | |
|--|------------------|
| NAME OF SOURCE U.S. Environmental Protection Agency | |
| ADDRESS RR B - 1300 Pennsylvania Ave., NW | |
| CITY AND STATE Washington, D.C. | |
| BUSINESS ACTIVITY, IF ANY, OF SOURCE (NA - Government Agency) | |
| DATE(S): 8 / 11 / 07 - 8 / 14 / 07 | AMT: \$ 1,653.35 |
| (If applicable) | |
| TYPE OF PAYMENT: (must check one) <input checked="" type="checkbox"/> Gift <input type="checkbox"/> Income | |
| DESCRIPTION: Transportation, lodging and subsistence in connection with a speech. | |

| | |
|--|------------------|
| NAME OF SOURCE JP Morgan | |
| ADDRESS 270 Park Ave. | |
| CITY AND STATE New York, NY | |
| BUSINESS ACTIVITY, IF ANY, OF SOURCE Financial Services Firm | |
| DATE(S): 9 / 23 / 07 - 9 / 25 / 07 | AMT: \$ 1,883.42 |
| (If applicable) | |
| TYPE OF PAYMENT: (must check one) <input checked="" type="checkbox"/> Gift <input type="checkbox"/> Income | |
| DESCRIPTION: Airfare and lodging in connection with a speech. | |

| | |
|---|---------|
| NAME OF SOURCE | |
| ADDRESS | |
| CITY AND STATE | |
| BUSINESS ACTIVITY, IF ANY, OF SOURCE | |
| DATE(S): / / - / / | AMT: \$ |
| (If applicable) | |
| TYPE OF PAYMENT: (must check one) <input type="checkbox"/> Gift <input type="checkbox"/> Income | |
| DESCRIPTION: | |

Comments: _____